

# Lincoln



# Nebraska's Capital City

December 11, 2001

Mayor Wesely and City Council  
City of Lincoln  
City County Building  
Lincoln, NE

Mayor Wesely and Members of the City Council:

An investigation has been made regarding the application of Hannah Hoch, d.b.a. Silver Spur Roadhouse, 5100 North 48<sup>th</sup> requesting a class C liquor license for this location. This location was previously known as Silver Spur, which held a class C liquor license.

Hannah Hoch, sole owner requests that she be approved as the manager of this liquor license.

Hannah Hoch was born in 1968. She attended Nebraska City Public High School graduating in 1987.

Hannah Hoch employment history is as follows:

2000 – 2001	Americorps, Lincoln Action Program	Lincoln, NE.
1995 – 2000	Owner, La Lola Bar	Mexico
1990 – 1995	Bartender, Iguana's / Precinct	Lincoln NE.

If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.

THOMAS K. CASADY, Chief of Police



#### Police Department

575 South 10th Street / Lincoln, Nebraska 68508 / Phone: 402-441-7204 / Fax: 402-441-8492 / Website: [www.ci.lincoln.ne.us](http://www.ci.lincoln.ne.us)

A nationally accredited law enforcement agency



Liquor License Business Report / Completed by Inv Fosler Date: 12-11-01

DBA: Silver Spur Roadhouse

ADDRESS 5100 N 48th PHONE 464-3888

TYPE OF INVESTIGATION:

PURCHASE UPGRADE EXPANSION NEW  
OWNER MANAGER OTHER

TYPE OF BUSINESS BAR

CLASS: A B C D I J K CATERING OTHER

OWNERSHIP CORPORATION PARTNERSHIP INDIVIDUAL

PURCHASE PRICE \_\_\_\_\_ PROPERTY EQUIPMENT VALUE \_\_\_\_\_

AMOUNT FINANCED 35,000 SOURCE Wells Fargo

COLLATERAL \_\_\_\_\_ COSIGNER(S) FATHER

LEASE AGREEMENT 4-3yr 1400 mo.

EST INCOME %FOOD \_\_\_\_\_ %LIQUOR 100

COMMERCIAL INDUSTRIAL RESIDENTIAL

TRAFFIC Low PARKING off-street

READY FOR OPERATION: YES NO, EST DATE \_\_\_\_\_

FOOD SERVICE NONE # OF EMPLOYEES F/T 1 P/T 1

DOES LICENSE COMPLY WITH LEGAL DISTANCES: YES

NO

EST SEATING 125 EST # DAILY CUSTOMERS 100

HOURS OF OPERATION Tue Thur 3-1am Fri 7am/1am SAT/SUN  
NOON/1AM

HUMAN RIGHTS COMMISSION CHECKED- YES NO N/A

Liquor License Investigation

Business (DBA) SILVER SPUR

☒ Manager ☒ Owner Other \_\_\_\_\_

Name: HANNAH HOCH

US Citizen ? ☒ Yes No

Has applicant ever been cited for liquor law violations ? ☒ No Yes  
Explain \_\_\_\_\_

Does applicant have an interest in another liquor license ? ☒ No Yes  
Explain \_\_\_\_\_

Is spouse qualified to hold a license ? Yes No ☒ N/A

How is applicant if not an owner to be paid ? Salary Hourly N/A

How many hours will applicant be at the establishment ? 80

Any other employment ? ☒ No Yes, explain \_\_\_\_\_

Any previous experience with a liquor license ? ☒ Yes No

Any criminal convictions ? ☒ No Yes  
Comments \_\_\_\_\_

Is applicant a property owner in Lincoln ? Yes ☒ No

Is applicant involved in any civil litigation ? ☒ No Yes  
Comments \_\_\_\_\_

☒ Photo ☒ Records Check ☒ References

Comments \_\_\_\_\_

Interview Date 12 / 11 / 01

# STATE OF NEBRASKA

*Rues*

*let date: 12-10-01*

*PH: 1-7-02*



Mike Johanns  
Governor

November 29, 2001

City Clerk of Lincoln  
City/County Building  
555 S 10 Street  
Lincoln, NE 68508

NEBRASKA LIQUOR CONTROL COMMISSION

Forrest D. Chapman

Executive Director

301 Centennial Mall South, 5th Floor  
P.O. Box 95046

Lincoln, Nebraska 68509-5046

Phone (402) 471-2571

Fax (402) 471-2814

TRS USER 800 833-7352 (TTY)

*139577  
115*

*2B*

*Hoch. Hanna  
dba Silver Spur Roadhouse  
5100 No. 48th 68504  
'Q'*

C #53846

Dear Local Governing Body:

Attached is the form to be used on all retail liquor license applications. Local clerks must collect proper license fees and occupation tax per ordinance, if any, before delivering the license at time of issuance.

## TWO KEY TIME FRAMES TO KEEP IN MIND ARE:

- 1) You have 45 days to conduct a hearing after the date of receipt of the notice from this Commission (§53-134). You may choose NOT to make a recommendation of approval or denial to our Commission.

PER §53-133, THE LIQUOR CONTROL COMMISSION SHALL SET FOR HEARING ANY APPLICATION WHEREIN:

- 1) There is a recommendation of denial from the local governing body.
- 2) A citizens protest; or
- 3) Statutory problems that the Commission discovers.

PLEASE NOTE...A LICENSEE MUST BE "PROPERLY" LICENSED IN ORDER TO PURCHASE FROM WHOLESALERS; AND, A LICENSE IS EFFECTIVE:

- 1) Upon payment of the license fees;
- 2) Physical possession of the license;
- 3) Effective date on the license.

Sincerely,

NEBRASKA LIQUOR CONTROL COMMISSION

*Forrest D. Chapman*

Licensing Division

Enclosures

Rhonda R. Flower  
Commissioner

Bob Logsdon  
Chairman

R.L. (Dick) Coyne  
Commissioner

An Equal Opportunity/Affirmative Action Employer

Printed with soy ink on recycled paper

FORM 35-4001  
REV. 12 99

C# 53846

**APPLICATION FOR LICENSE**

Nebraska Liquor Control Commission  
 PO Box 95046,  
 301 Centennial Mall South  
 Lincoln, NE 68509-5046

<http://www.nol.org/home/NLCC/>

Phone: (402) 471-2571

Fax: (402) 471-2814

RECEIVED

NOV - 9 2001

NEBRASKA LIQUOR  
CONTROL COMMISSION*replacing existing lic*

**INSTRUCTIONS:** Include: 1. Applicable fees payable to Liquor Control Commission 2. Copy of birth certificate or naturalization papers proving U.S. citizenship for each individual and spouse named on application (not required of corporations or spouse(s) who file an affidavit of no interest with application Commission form 4178 3. Corporations must include copy of articles of incorporation as filed with the Secretary of States office in the state of Nebraska 4. Commission checklist, form 4251 5. Fingerprint cards and processing fees (are required of individuals, all partners and spouses. Corporate applicants must file for CEO/Manager & stockholders holding over 25% stock 6. All applications must be typewritten printed clearly 7. Submit in **Triplicate** 8. Required areas marked by a red asterisk ( \* )

**CLASS OF LICENSE FOR WHICH APPLICATION IS MADE AND LIST OF FEES FOR EACH**

Class of License (Check applicable class) *	Registration Fee	License Fees	Corporate Surety Bond
<input type="checkbox"/> A Beer, On Sale Only - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> F Beer, On Sale Only - Outside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> B Beer, Off Sale Only - Inside/Outside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> J Wine, Beer, On Sale Only - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> I Spirits, Wine, Beer, On Sale Only - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> D Spirits, Wine, Beer, Off Sale Only - Inside Corporate Limits	\$45.00	\$150.00	exempt
<input type="checkbox"/> D1 Spirits, Wine, Beer, Off Sale Only - within extraterritorial zoning jurisdiction	\$45.00	\$150.00	exempt
<input checked="" type="checkbox"/> C Spirits, Wine, Beer On & Off Sale - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> M Bottle Club (Spirits, Wine, Beer, On Sale)	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> H Nonprofit Corporation	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> K Wine Only, Off Sale	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> O Boat	\$45.00	\$50.00	exempt
<input type="checkbox"/> V Manufacturer of Beer, Wine & Distilled Spirits	\$45.00	Varies \$100 to \$1,000	\$10,000 min.

<input checked="" type="checkbox"/> X Wholesale Liquor	\$45.00	\$500.00	\$ 5,000 min.
<input type="checkbox"/> W Wholesale Beer	\$45.00	\$250.00	\$ 5,000 min.
<input type="checkbox"/> Y Farm Winery	\$45.00	\$250.00	\$ 1,000 min.
<input type="checkbox"/> L Craft Brewery (Brew Pub)	\$45.00	\$250.00	\$ 1,000 min.

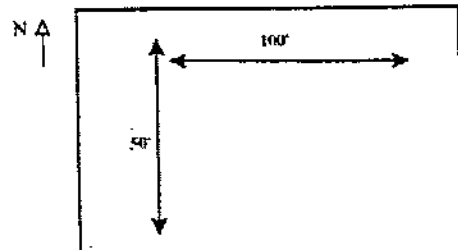
TYPE OF APPLICATION *	CORPORATE SURETY BOND INFORMATION
Type of application being applied for (check appropriate box)  1. <input checked="" type="radio"/> Individual License requires Form 1 to be attached. 2. <input type="radio"/> Partnership License requires Form 2 to be attached. 3. <input type="radio"/> Corporate License requires Forms 3 and Manager Application to be attached	Bond Company - for Classes L V W X Y on <div style="border: 1px solid black; height: 20px; width: 100%;"></div> Start Date Month/Day/Year <div style="border: 1px solid black; width: 100px; height: 20px; display: inline-block;"></div> Bond Number <div style="border: 1px solid black; width: 100px; height: 20px; display: inline-block;"></div>

### SECTION A - LOCATION INFORMATION - Must be completed by all applicants

Trade Name (name of business) <div style="border: 1px solid black; padding: 2px;">Silver Spur Roadhouse</div>	Telephone Number at premise to be licensed <div style="border: 1px solid black; padding: 2px;">402-464-3888</div>
1) Street Address of Proposed licensed premise <div style="border: 1px solid black; padding: 2px;">5100 N. 48th St.</div>	2) Mailing Address for receipt of Liquor Control Commission mailings <div style="border: 1px solid black; padding: 2px;">5100 N. 48th St.</div>
City <div style="border: 1px solid black; padding: 2px;">Lincoln</div> County <div style="border: 1px solid black; padding: 2px;">Lancaster</div>  Zip Code <div style="border: 1px solid black; padding: 2px;">68504</div>	City <div style="border: 1px solid black; padding: 2px;">Lincoln</div> County <div style="border: 1px solid black; padding: 2px;">Lancaster</div>  Zip Code <div style="border: 1px solid black; padding: 2px;">68504</div>

### DESCRIPTION AND DIAGRAM OF THE STRUCTURE TO BE LICENSED

In the space provided draw the area to be licensed. This should include storage areas, basement, sales areas and areas where consumption or sales of alcohol will take place. If only a portion of the building is to be covered by the license, you must still include dimensions (length x width) of the licensed area as well as the dimensions of the entire building in situations where only a portion of the entire bldg. is to be covered by the license. No blue prints will be accepted. Be sure to indicate the direction North and number of floors of the building.



Example: East portion approximately 50' x 100' of main floor of 3 story building plus basement. Approximate 30' x 50' at the East end.

*See attached*

SECTION B	OTHER INFORMATION REQUIRED *		Explanation/Comments, Note: Only what is visible on screen will be printed
<p>* 1. <b>READ CAREFULLY.</b> Answer completely and accurately.</p> <p>Has anyone who is a party to this application, or their spouse, <u>ever</u> been convicted of or plead guilty to any criminal charge. Criminal charge means any charge alleging a felony or misdemeanor violation of a federal or state law; or a violation of a local law, ordinance or resolution. Include any DWIs or DUIs. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.</p>	Yes <input checked="" type="radio"/>	No <input checked="" type="radio"/>	<div style="text-align: right; font-size: small;">RECEIVED JAN 14 2014 COMM. DIVISION</div>
<p>* 2. Are you buying the business and/or assets of a licensee? If yes, submit a copy of the sales agreement with a listing of assets being acquired including liquor inventory (name brand and container size required).</p>	Yes <input checked="" type="radio"/>	No <input type="radio"/>	See attached
<p>* 3. Are you filing a temporary agency agreement, Commission form 4231, whereby current licensee allows you to operate on their license? If yes, attach copy.</p>	Yes <input checked="" type="radio"/>	No <input type="radio"/>	See attached
<p>* 4. Are you borrowing any money from any source to establish and/or operate the business? If yes, list the lender.</p>	Yes <input checked="" type="radio"/>	No <input type="radio"/>	Wells Fargo Bank Nebraska, N.A.
<p>* 5. Will any person or entity other than licensee be entitled to a share of the profits of the establishment? If yes, explain.</p>	Yes <input type="radio"/>	No <input checked="" type="radio"/>	



<p>* 6. Will any of the furniture, fixtures and equipment to be used in this business be owned by others? If yes, list such items and the owner.</p>	<p>Yes <input checked="" type="radio"/></p>	<p>No <input type="radio"/></p>	<p>See attached lease</p>
<p>* 7. Will any person(s) other than named in this application have any direct or indirect ownership or control of the business? If yes, explain?</p>	<p>Yes <input type="radio"/></p>	<p>No <input checked="" type="radio"/></p>	
<p>* 8. Are the premises to be licensed within 150 ft. of a church, school, hospital, home for the aged or indigent persons or for veterans, their wives, children, or within 300 ft. of a college or university campus? If yes, list the name of such institution and where it is located in relation to the premises. Per Sec. §53-177.</p>	<p>Yes <input type="radio"/></p>	<p>No <input checked="" type="radio"/></p>	
<p>* 9. Is anyone listed on this application a law enforcement officer? If yes, list the person, the law enforcement agency involved and the persons exact duties.</p>	<p>Yes <input type="radio"/></p>	<p>No <input checked="" type="radio"/></p>	
<p>10. List the primary bank and/or financial institution (branch if applicable) to be utilized by the business and the person(s) who will be authorized to write checks and/or make withdrawals on accounts at such institutions.</p>	<p>Wells Fargo Bank Nebraska, N.A. 70th &amp; O Street, Lincoln, NE Hannah Hoch</p>		
<p>11. List all past and present liquor licenses held by any person named in this application. Include license holder name, location of license and license number. Also list reasons for termination of any licenses previously held.</p>	<p>No previous license held in USA; held license in Mexico 1995-2000</p>		
<p>12. List the person who will be the on site supervisor of the business and the estimated number of hours per week such person or manager will be on the premises supervising operations.</p>	<p>Hannah Hoch, 70 hours</p>		

13. List the training and experience of the person listed in #12 above in connection with selling and/or serving alcohol products.	Held liquor license in Mexico and owned restaurant for 5 years; bartended in Lincoln and Minneapolis for 8 years. <div style="text-align: right; font-weight: bold; font-size: 1.2em;">RECEIVED</div> <div style="text-align: right; font-weight: bold; font-size: 0.8em;">NOV - 1 2000</div>		
14. If the property for which this license is sought is owned, submit a copy of the deed, or proof of ownership, if leased submit a copy of the lease covering the entire license year. (Documents must show title or lease held interest in name of applicant as owner or lessee in the individual(s) or corporate name for which the application is being filed)	copy of lease attached. <div style="text-align: right; font-weight: bold; font-size: 0.8em;">NOV - 1 2000 LIQUOR CONTROL COMMISSION</div>		
15. When do you intend to open for business?	open currently under a temporary agency agreement		
16. List the principal residence for the past 10 years for all persons required to sign application. If necessary attach a separate sheet.			
NAME	FROM (YEAR)	TO (YEAR)	RESIDENCE (CITY, STATE)
Hannah Hoch	1990	1995	Lincoln, Nebraska
Hannah Hoch	1995	2000	San Miguel De Allen De
			Guanajuato Mexico
Hannah Hoch	2000	2001	Lincoln, Nebraska

The undersigned applicant(s) hereby consent(s) to a background investigation and release of present & future records of every kind and description including police records, tax records (State and Federal), bank or lending institution records, and said applicant(s) and spouse(s) waive(s) any right or causes of action that said applicant(s) or spouse(s) may have against the Nebraska Liquor Control Commission, the Nebraska State Patrol, and any other individual disclosing or releasing said information. Any documents or records for the proposed business or for any partner or stockholder that are needed in furtherance of the application investigation or any other investigation shall be supplied immediately upon demand to the Nebraska Liquor Control Commission or the Nebraska State Patrol. The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete and/or inaccurate.

Individual applicants agree to supervise in person the management and operation of the business and that they will operate the business authorized by the license for themselves and not as an agent for any other person or entity. Corporate applicants agree the approved manager will superintend in person the management and operation of the business. Partnership applicants agree one partner shall superintend the management and operation of the business. All applicants agree to operate the licensed business within all applicable laws, rules, regulations, and ordinances and to cooperate fully with any authorized agent of the Nebraska Liquor Control Commission.

Must be signed in the presence of a notary public. Must be signed by applicant and spouse; if a partnership, all partners and spouses must sign and corporation, all stockholders (holding more than 25% of the stock), officers, directors and spouses must sign. Full names only, initials not acceptable.

Sign  
Here

[Signature]

Sign  
Here

Sign  
Here

Sign  
Here

Sign  
Here

Sign  
Here

Sign  
Here

Sign  
Here

Subscribed in my presence and sworn to before me this 9th day  
of November, 2001

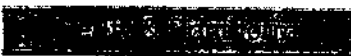
(SEAL)

In compliance with ADA, this

application for license form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternative format.

Sign  
here

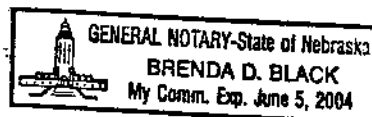
  
Notary Public Signature



FORM 35-4010

1

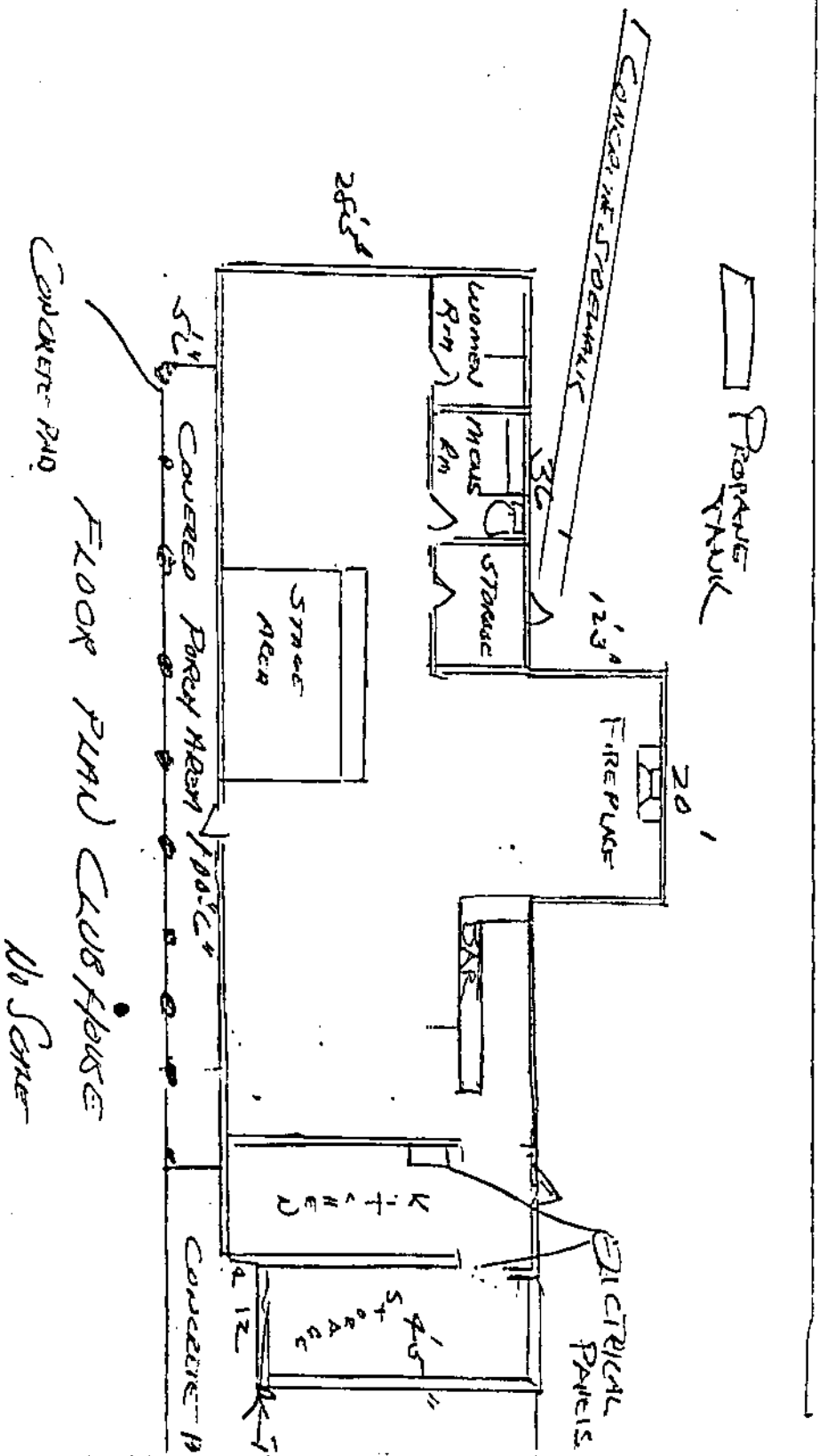
REV 1/01



Drive way to bases

Parking Area

Parking Area

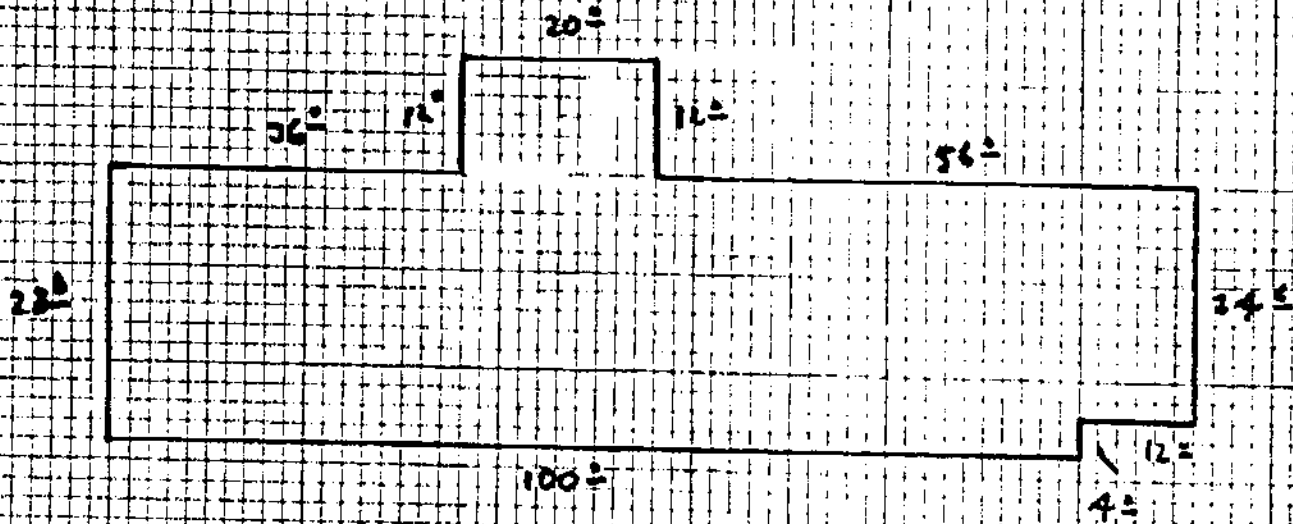


TOTAL FLOOR AREA = 5393 sq. ft.

## SKETCH ADDENDUM

Client	Claude L. Walton		
Property Address	5100 North 48th Street		
City	Lincoln	County	Lancaster
Lender		State	NE
		Zip Code	

NIGHT CLUB STRUCTURE



SLAB ON GRADE

KITCHEN

TWO LAVATORIES

MAJOR CONSTRUCTION

BAR

FIREPLACE

F/A PROPANE HEAT

COVERED PORCH

3384 SQ. FT.

1. On 2001, The Silver Spur, Seller and Buyer entered into a contract for sale of the business known as The Silver Spur, which contract is contingent upon Buyer receiving approval for a liquor license to operate the business.

2. Seller and Buyer agree to allow Buyer to operate the business, subject to approval by the Liquor Control Commission, for a period not to exceed 120 days subsequent to \_\_\_\_\_, the date of filing the application with the Liquor Control Commission.

3. Seller will maintain a possessory interest in the property in the form of a lease, use permit or license;

4. Buyer will at all times be the agent of the Seller, but Buyer will be completely and totally responsible for the operation of the business and for all liability associated with the operation of the business during the time when Buyer is acting as Seller's agent; it is specifically understood that Seller shall have no liability for the operation of the business during this period of time, and Buyer agrees to indemnify and hold Seller harmless from any claims arising during this period of operation; however, it is understood that the liquor license remains in the name of the Seller and Seller will be responsible for all violations of the liquor laws of the State of Nebraska until such time as Seller's license is canceled;

5. At time of closing, certain funds will be held in escrow pending issuance of the license.

6. Financial Institution: Name, Address, Account number of where escrow account is being held

Wells Fargo 70th & D Branch Lincoln Acct #

7. All profits derived from the operation of the business by the Buyer, after payment of bills and salaries, shall be paid to the same escrow agent to be held until the issuance of the license, it being specifically understood that the Buyer shall receive no profits from the operation of the business until the liquor license has been issued to Buyer, but shall have the right to direct the investment of profit funds by escrow agent.

8. This agreement constitutes the entire and complete understanding of all parties with regard to the agency relationship, and is binding upon the heirs, personal representatives and successors of the parties.

9. It is hereby understood that in the event the Commission denies this application, this Temporary Agency Agreement is null and void the date of the order.

Signature of Seller

Garrett D. Walton

Signature of Seller

Cheryl Walton

Signature of Buyer

[Signature]

Signature of Buyer

[Signature]

Dated this 28th day of November, 2001.

STATE OF NEBRASKA

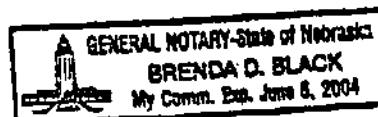
COUNTY OF

The above and foregoing Agency Agreement was acknowledged before me this 28 day of November, 2001 by Garrett D. Walton, as Seller, Cheryl Walton, as Seller.

The above and foregoing Agency Agreement was acknowledged before me this 28 day of November, 2001 by Hannah [Signature], as Buyer, \_\_\_\_\_, as Buyer.

Signature & Seal of Notary Public

[Signature]



REV 3/00 Form 35-4331

**NEBRASKA LIQUOR CONTROL COMMISSION**  
**Individual Application**  
**for License**  
**FORM 1**

**INSTRUCTIONS:**

- 1) An Individual Licensee Must be a Resident of the State of Nebraska.
  - 2) Each Applicant and Spouse must attach fingerprint cards (2 cards per person) and proper fees.
  - 3) All applications must be typewritten and submitted in triplicate.
- Required areas marked by a red asterisk ( \* )

Name of Applicant (Last, First, Middle,  
Maiden). List any Previous Names or  
Aliases Used. \*

Hoch, Hannah Wharton

Social Security Number

\*

Date of Birth

\*\*

Applicant's Home Address (1)

710 N. 24th St. \*

Applicant's Home Address (2)

\*

City

Lincoln

\*

County

Lancaster

\*

Zip Code

68503 \* -

Driver's License  
Number

\*

State

NE

\*

Home Telephone Number

475-6994 \*

Business Telephone Number

464-3888 \*

\* **Are You Married?** Yes ☐ No ☒ If Yes, You must complete the following:

Spouse's Name (Last, First, Middle,  
Maiden). List Any Previous Names or  
Aliases Used

Spouse's Social Security Number

Spouse's Date of  
Birth

Spouse's Driver License number

State

**NEBRASKA LIQUOR CONTROL COMMISSION**



WHEN THIS COPY CARRIES THE RAISED SEAL OF THE NEBRASKA HEALTH AND HUMAN SERVICES SYSTEM, IT CERTIFIES THE BELOW TO BE A TRUE COPY OF THE ORIGINAL RECORD ON FILE WITH THE NEBRASKA HEALTH AND HUMAN SERVICES SYSTEM, VITAL STATISTICS SECTION, WHICH IS THE LEGAL DEPOSITORY FOR VITAL RECORDS.

DATE OF ISSUANCE  
**NOV 14 2001**  
 LINCOLN, NEBRASKA

*Stanley S. Cooper*  
**STANLEY S. COOPER**  
 ASSISTANT STATE REGISTRAR  
 HEALTH AND HUMAN SERVICES SYSTEM

STATE OF NEBRASKA—DEPARTMENT OF HEALTH  
 Bureau of Vital Statistics

**CERTIFICATE OF LIVE BIRTH**

126-

**68 15480**

CHILD—NAME 1. <b>Hannah Wharton Koch</b>		DATE OF BIRTH (MONTH, DAY, YEAR) <b>8-30-68</b>		BIRTH NUMBER <b>68 15480</b>	HOUR <b>12:15 AM</b>
SEX 2. <b>Female</b>	THIS BIRTH—SINGLE, TWIN, TRIPLET, ETC. (SPECIFY) 3. <b>Single</b>	IF NOT SINGLE BIRTH—BORN FIRST, SECOND, THIRD, ETC. (SPECIFY) 4. <b>1</b>		COUNTY OF BIRTH 5. <b>Ohio</b>	
CITY, TOWN, OR LOCATION OF BIRTH 6. <b>Nebraska City, Nebraska</b>		INSIDE CITY LIMITS (SPECIFY YES OR NO) 7. <b>Yes</b>	HOSPITAL—NAME (IF NOT IN HOSPITAL, GIVE STREET AND NUMBER) 8. <b>St. Mary's Hospital</b>		
MOTHER—MAIDEN NAME 9. <b>Nancy Lynn DeLong</b>		AGE (AT TIME OF THIS BIRTH) 10. <b>33</b>	STATE OF BIRTH (IF NOT IN U.S.A., NAME COUNTRY) 11. <b>Nebraska</b>		
RESIDENCE—CITY 12. <b>Nebraska City</b>	COUNTY 13. <b>DeWitt</b>	CITY, TOWN, OR LOCATION 14. <b>Nebraska City, 68110</b>		STREET AND NUMBER 15. <b>1218-3rd Comm</b>	
FATHER—NAME 16. <b>Richard Homer Koch</b>		AGE (AT TIME OF THIS BIRTH) 17. <b>30</b>	STATE OF BIRTH (IF NOT IN U.S.A., NAME COUNTRY) 18. <b>Ohio</b>		
INFORMANT—NAME OR SIGNATURE 19. <b>Wm. Nancy Koch</b>		RELATION TO CHILD 20. <b>Mother</b>			
I CERTIFY THAT THE ABOVE DETAILS CORRESPOND TO THE PLACE AND TIME AND ON THE DATE STATED ABOVE. 21. SIGNATURE <b>W.G. Kemmer Jr.</b> CERTIFIER—NAME (TYPE OR PRINT)		DATE SIGNED (MONTH, DAY, YEAR) 22. <b>28 Aug. 68</b>		ATTENDANT—M.D., P.O., OTHER (SPECIFY) 23. <b>M.D.</b>	
24. <b>Dr. W.G. Kemmer Jr.</b> REGISTRAR—SIGNATURE		25. <b>Nebraska City, Nebraska 68110</b> MAILING ADDRESS		DATE RECEIVED BY LOCAL REGISTRAR 26. <b>Aug. 30 - 1968</b>	